



# Arizona Medication Assistant Candidate Handbook

*EFFECTIVE: February 1, 2025*

Version 8

**Updates to the Medication Assistant Candidate Handbook – Effective: 2-1-2025**

The vocabulary words have been updated.

## Contact Information

<b>Questions regarding:</b> the testing process • test scheduling • eligibility to test: <b>(800) 393-8664</b>		
<b>Questions regarding:</b> Medication Assistant certification • renewals • or Registry: <b>(602) 771-7800</b>		
<b>D&amp;S Diversified Technologies (D&amp;SDT), LLP- Headmaster, LLP</b> PO Box 6609 Helena, MT 59604-6609  Email: <a href="mailto:arizona@hdmaster.com">arizona@hdmaster.com</a> Web Site: <a href="http://www.hdmaster.com">www.hdmaster.com</a> TestMaster Universe (TMU©): <a href="http://az.tmutest.com">az.tmutest.com</a>	Monday through Friday 6:00AM – 6:00PM <i>Mountain Standard Time (MT)</i>	Phone #: (800) 393-8664  Fax #: (406) 442-3357
<b>Arizona State Board of Nursing (AZBN)</b> 1740 W. Adams Street, Suite 2000 Phoenix, AZ 85007-2607  Email: <a href="mailto:arizona@azbn.gov">arizona@azbn.gov</a> Web Site: <a href="http://www.azbn.gov">www.azbn.gov</a>	Monday through Friday 8:00AM – 5:00PM	Phone #: (602) 771-7800

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## Introduction

A Medication Assistant competency evaluation program aims to ensure that candidates seeking to be Medication Assistants in Arizona understand the state standards and can competently and safely perform the job of an entry-level Medication Assistant.

This handbook describes the Medication Assistant competency examination process and is designed to help prepare candidates for testing.

There are two parts to the Medication Assistant competency examination—a multiple-choice knowledge test and a skill test. Exam candidates must be registered, complete approved training, pass both parts of the exam, and meet all other Arizona Board of Nursing (AZBN) requirements for certification in Arizona.

Arizona approved D&S Diversified Technologies (D&SDT)-Headmaster LLP to provide tests and scoring services for Medication Assistant Testing. For questions not answered in this handbook, please contact D&S Diversified Technologies (D&SDT)-Headmaster at (800)393-8664 or go to D&SDT-Headmaster’s [Arizona Medication Assistant webpage](#).

## AZBN Requirements Before Starting a Medication Assistant Training Program

In order to start a medication assistant training program, the following criteria must be met:

- Candidates must have been licensed and worked as a Licensed Nursing Assistant (LNA) for at least six (6) months **before** starting the medication assistant training program.
- Candidates must have no outstanding complaints or restrictions on their nursing assistant certification.
- Candidates must successfully complete an approved 100-hour Certified Medication Assistant training program.
- Candidates must pass the Certified Medication Assistant Competency Exam Knowledge and Skill tests components.
- The CMA Knowledge and Skill tests must be passed within one year after taking the training.
  - If not passed within one year from the completion of the training date, candidates must retake the training.

## Americans with Disabilities Act (ADA)

### ADA Compliance

The Arizona Board of Nursing (AZBN) and D&SDT-Headmaster provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the medication assistant competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for examination. D&SDT-Headmaster must approve accommodations in advance of examination. The request for accommodations can be found on the [D&SDT-HEADMASTER webpage](#) and by clicking on the PDF Fillable [ADA Accommodation Form 1404](#). Fill

out the ADA Request and attach the required documentation found on the second page of the request form to an email to [arizona@hdmaster.com](mailto:arizona@hdmaster.com) to be reviewed for an accommodation.

ADA request forms submitted without supporting documentation of a diagnosed disability will not be accepted or reviewed.

**Please allow additional time for your request to be approved.** If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-Headmaster at (800)393-8664.

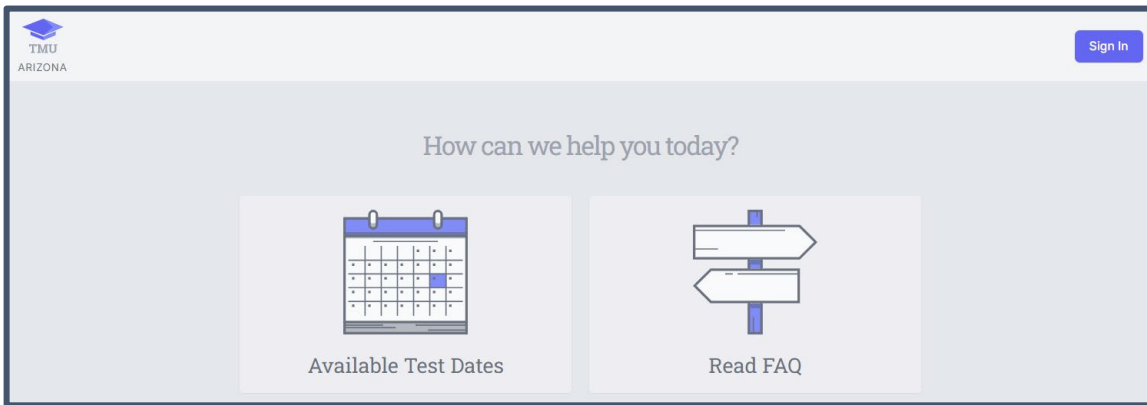
## The Arizona Medication Assistant Competency Exam

### Payment Information

Exam Description	Price
Knowledge Exam or Retake	<b>\$25</b>
Audio Version of the Knowledge Exam or Retake	<b>\$35</b>
Skill Exam or Retake	<b>\$70</b>

### Arizona TMU©

This is the Arizona TMU© main webpage [az.tmutest.com](http://az.tmutest.com).



### Completing your TMU© Account

#### Medication Assistant Training Program Candidates

Your initial registration information will be entered in D&SDT-Headmaster’s TestMaster Universe (TMU©) software.

**IMPORTANT:** Before you can test, you must sign in to the Arizona Medication Assistant TMU©, [az.tmutest.com](http://az.tmutest.com), using your secure Email or Username and Password and complete your demographic information.

- It is highly recommended that when you receive your confirmation email from TMU© (check your junk/spam mail) that your record has been created, you sign in to your account, update your password, and complete your demographic information.

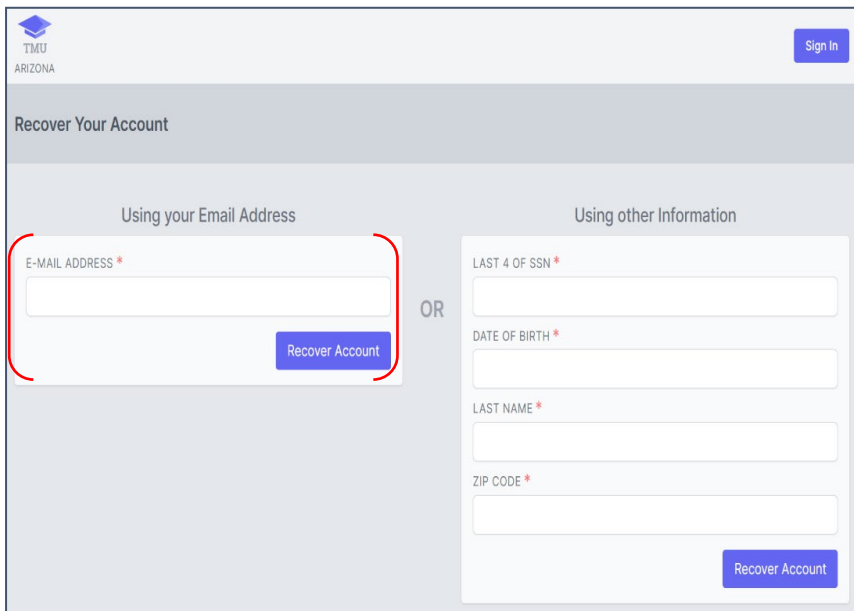
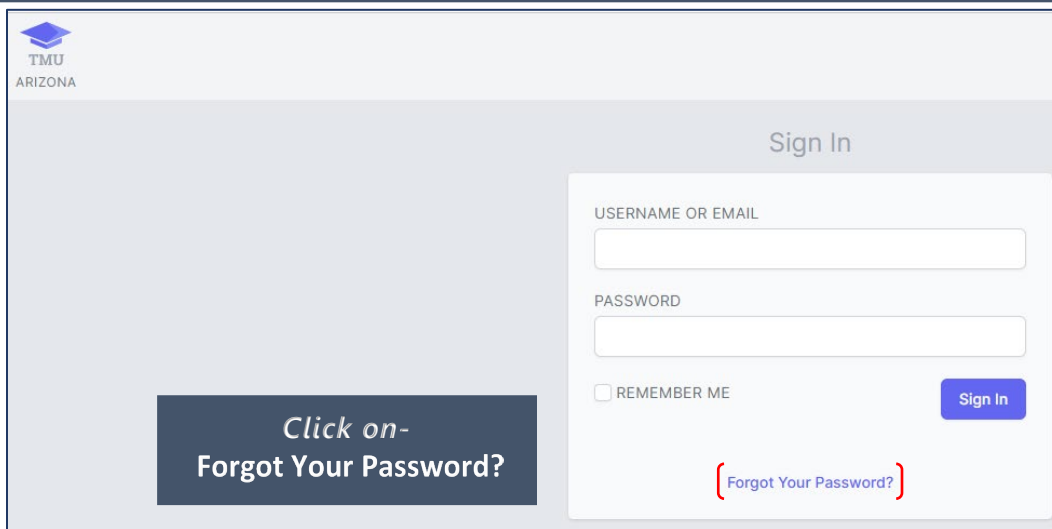
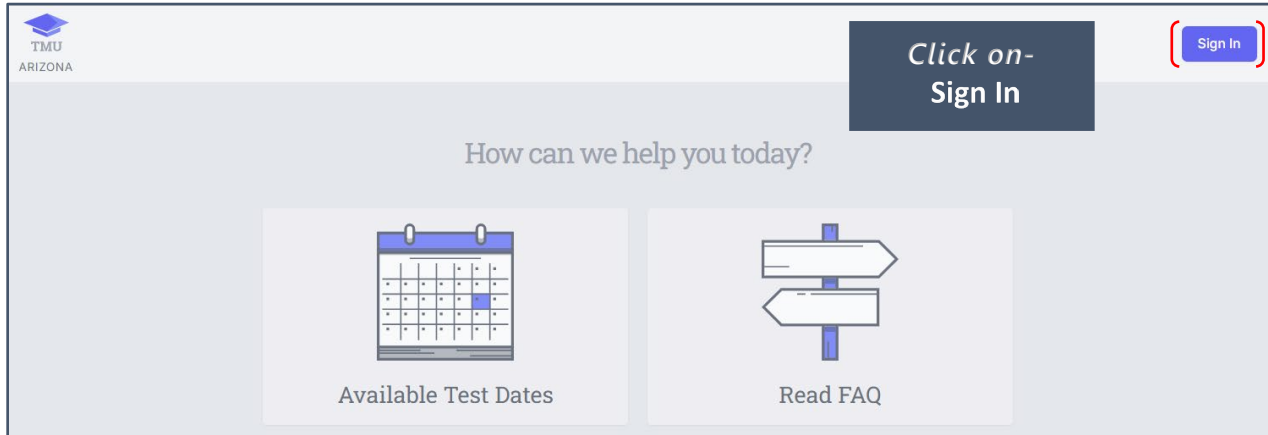
## Arizona Medication Assistant Candidate Handbook

If you do not know your Email or Username and Password, enter your email address and click on “Forgot Your Password?” You will be asked to re-enter your email, and a ‘reset password link’ will be sent to your email (see instructions under **‘Forgot your Password and Recover your Account’**). If you cannot sign in for any reason, contact D&SDT-Headmaster at (800)393-8664.

Screen you will see the first time you sign in to your TMU@ account **with the demographic information you need to enter to complete your account:**

If you have forgotten or do not know your Password, follow the instructions in the next section **‘Forgot Your Password and Recover your Account’** to Reset your Password and Recover your Account.

## Forgot your Password and Recover your Account



*Type in your Email Address  
Click on – Recover Account  
An email with the reset link will be emailed to you.  
Click on the reset link in your email to reset your password.  
-OR- You can type in the requested data under Using other Information  
Click on - Recover Account*

# Arizona Medication Assistant Candidate Handbook

TMU  
ARIZONA

Sign In

### Recover Your Account

We have e-mailed your password reset link! Please allow a few minutes for the email to be delivered.

Using your Email Address

E-MAIL ADDRESS \*

Recover Account

OR

Using other Information

LAST 4 OF SSN \*

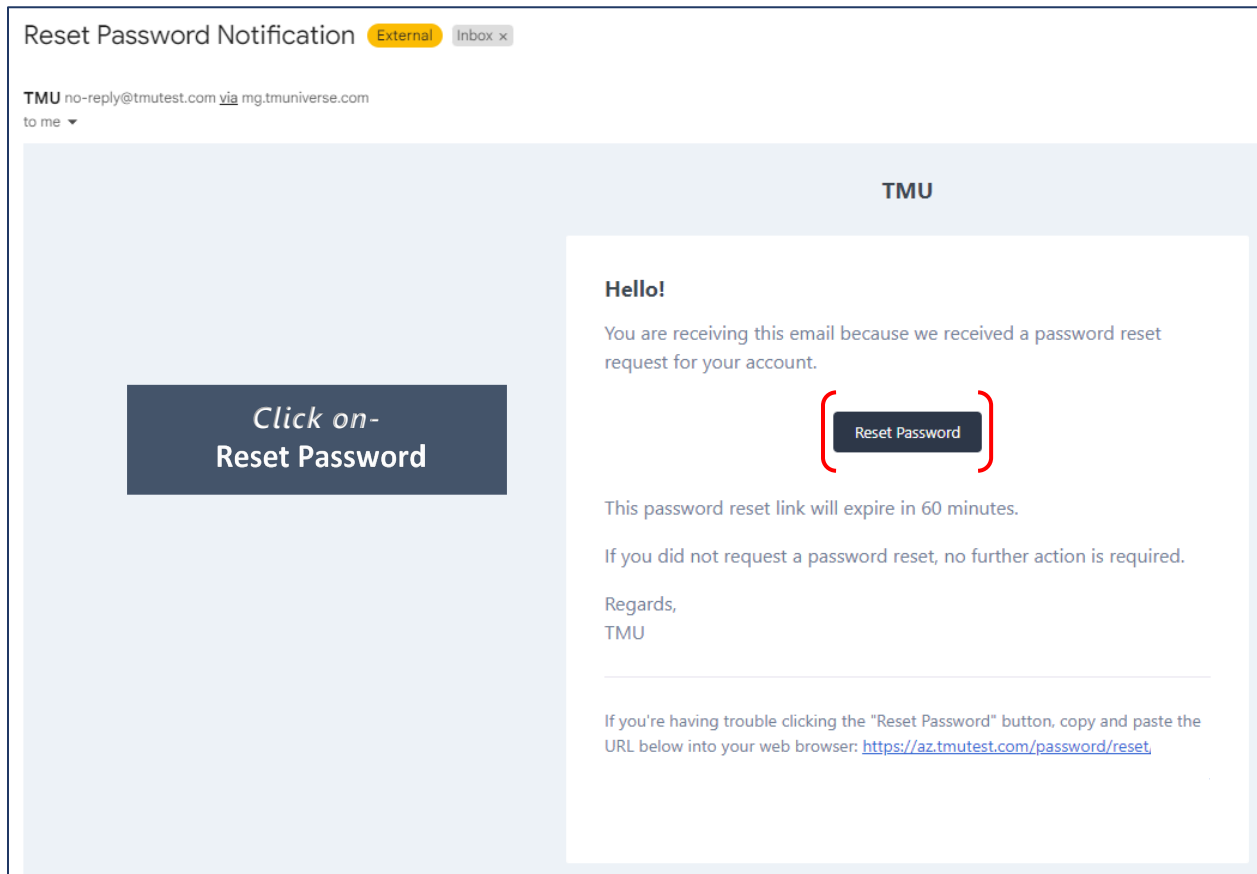
DATE OF BIRTH \*

LAST NAME \*

ZIP CODE \*

Recover Account

This is what the email will look like (check your junk/spam folder for the email):





**Note:** If you do not reset your password right away, the link does expire in 60 minutes and after that time, you will need to request a new link.

### Reset Your Password

E-MAIL ADDRESS  
sample@sampleemail.com

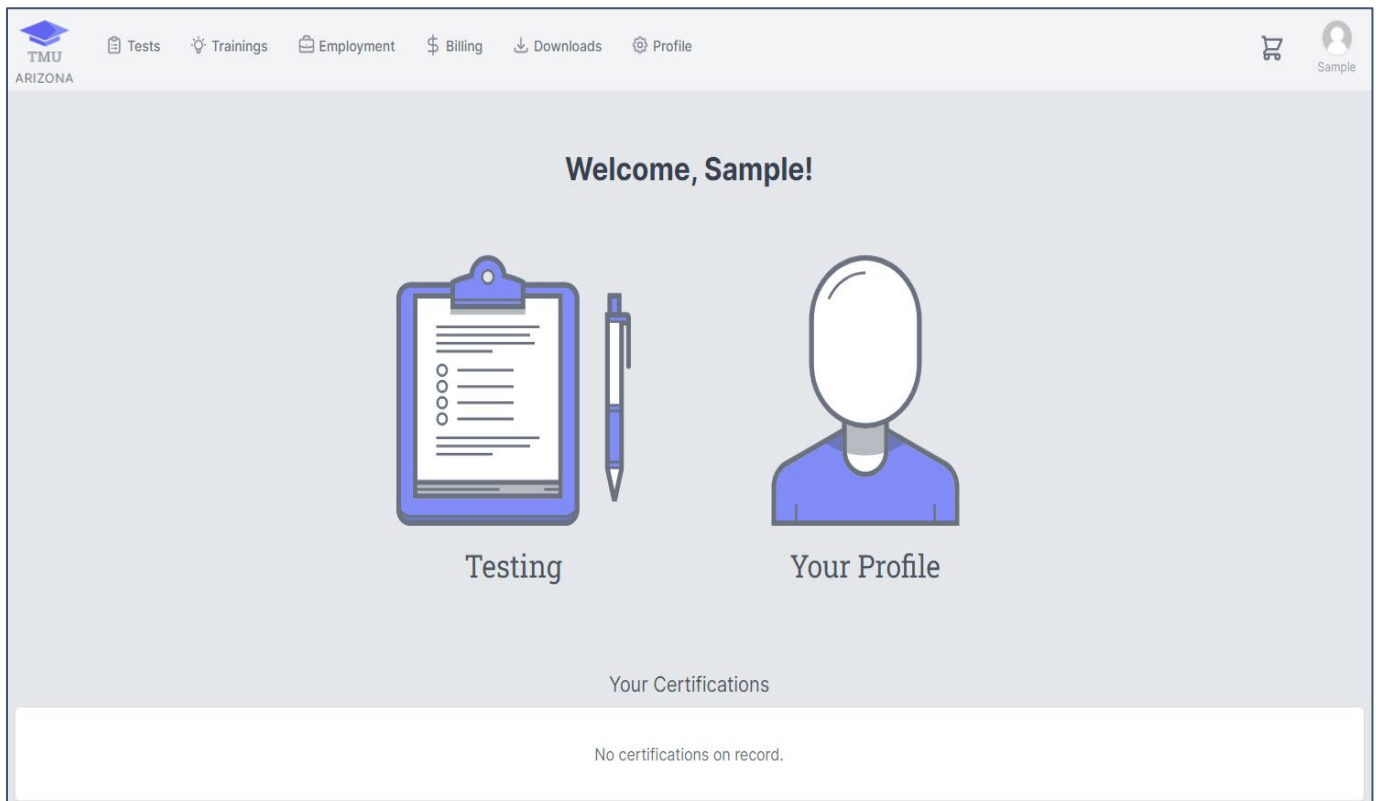
PASSWORD

CONFIRM PASSWORD

Reset Password

Type in your Password and Confirm Password, then click on – Reset Password

This is the home screen you will see once you have reset your password:



## Education Waivers for Military, Foreign Graduate, or Nursing Students

### REQUIREMENTS

For information on MA Education Waivers, visit the AZBN website [www.azbn.gov](http://www.azbn.gov), then click on Applications and Forms and scroll down to “Other Form Downloads”.

If you have an AZBN-approved Medication Assistant Education Waiver (military, foreign graduate or nursing student), you will need to complete, upload your approved MA Education Waiver from AZBN and submit the **Medication Assistant Education Waiver Application** found at [az.tmutest.com/apply/6](http://az.tmutest.com/apply/6).

Once D&SDT-Headmaster approves your application, you will receive an email and text message with your Username and Temporary Password to sign in to your TMU© account, pay your testing fees, and schedule a test event. Please follow the instructions under the ‘**Complete your TMU Account**,’ ‘**Self-Pay of Testing Fees**,’ and ‘**Schedule/Reschedule a Test Event**’ sections.

### Scheduling an Arizona Medication Assistant Exam

In order to schedule an examination date, candidates must have successfully completed an Arizona Board of Nursing (AZBN) approved Medication Assistant (MA) training program or have an AZBN-approved MA Education Waiver. In addition, all Medication Assistant certification exam candidates must be registered with D&SDT-Headmaster by their training program unless the AZBN grants a waiver. Upon passing both portions of the CMA exam, your registration information will be transmitted to the AZBN.

Once your completed record is in the D&SDT-Headmaster TestMaster Universe© (TMU©) database, you may schedule your exam date online at the Arizona Medication Assistant TMU© webpage at [az.tmutest.com](http://az.tmutest.com) using your email and password (see instructions under ‘**Forgot your Password and Recover your Account**,’ ‘**Self-Pay of Testing Fees**’ and ‘**Schedule/Reschedule a Test Event**’).

Securely processed Visa or MasterCard credit/debit card information is required when scheduling online. After testing fees are paid, you can schedule and/or reschedule your test event up to the business day before a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may log in with any Internet-connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To schedule or reschedule your test date, sign in to the Arizona Medication Assistant TMU© webpage at [az.tmutest.com](http://az.tmutest.com) with your email and password.

If you cannot schedule/reschedule online, please call D&SDT-Headmaster at (800)393-8664 during regular business hours, 6:00AM to 6:00PM, MT, Monday through Friday, excluding Holidays, for assistance.

### Self-Pay of Testing Fees

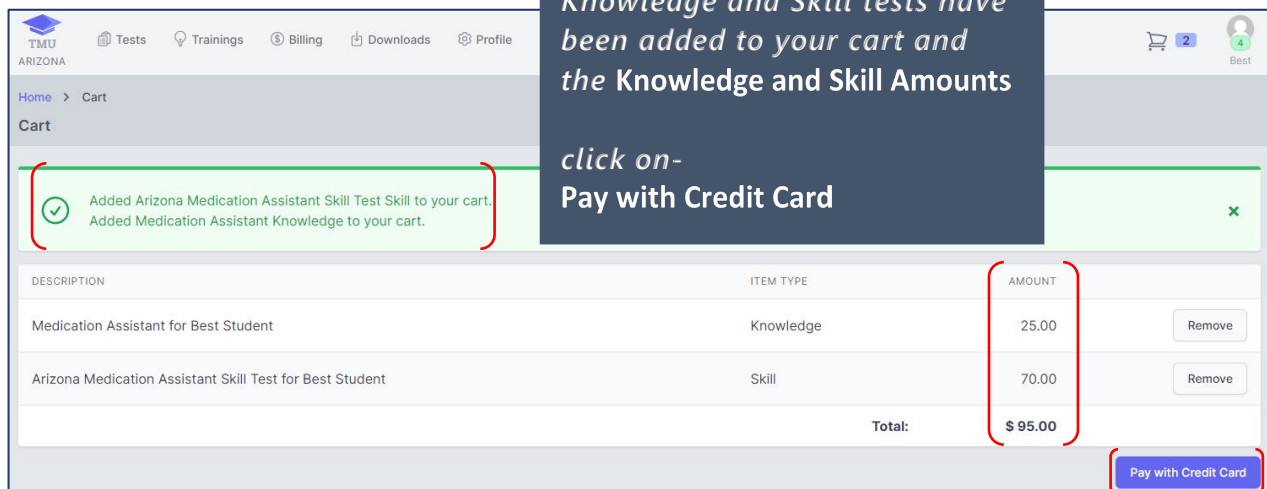
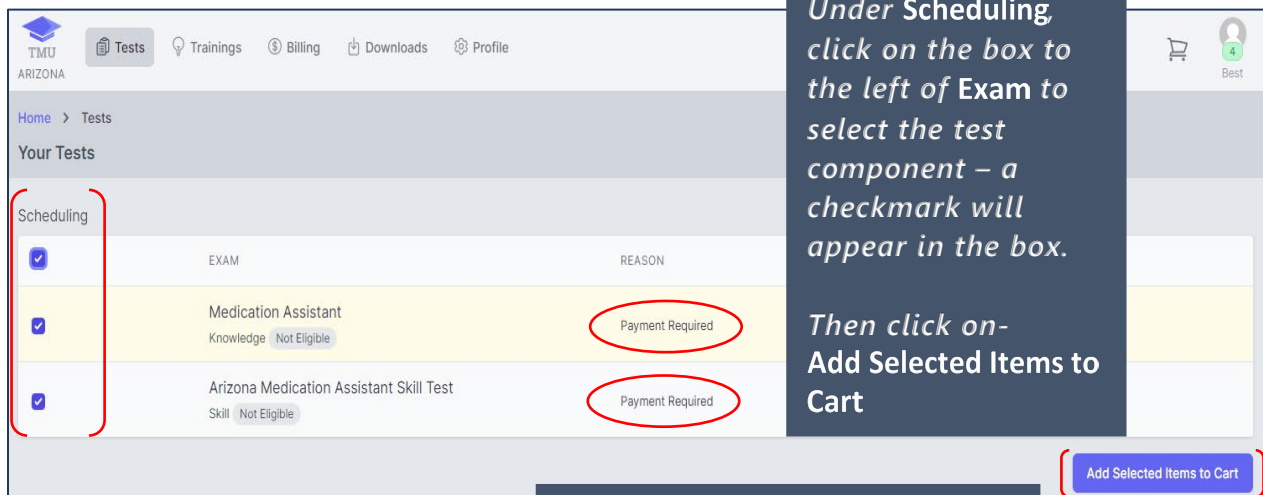
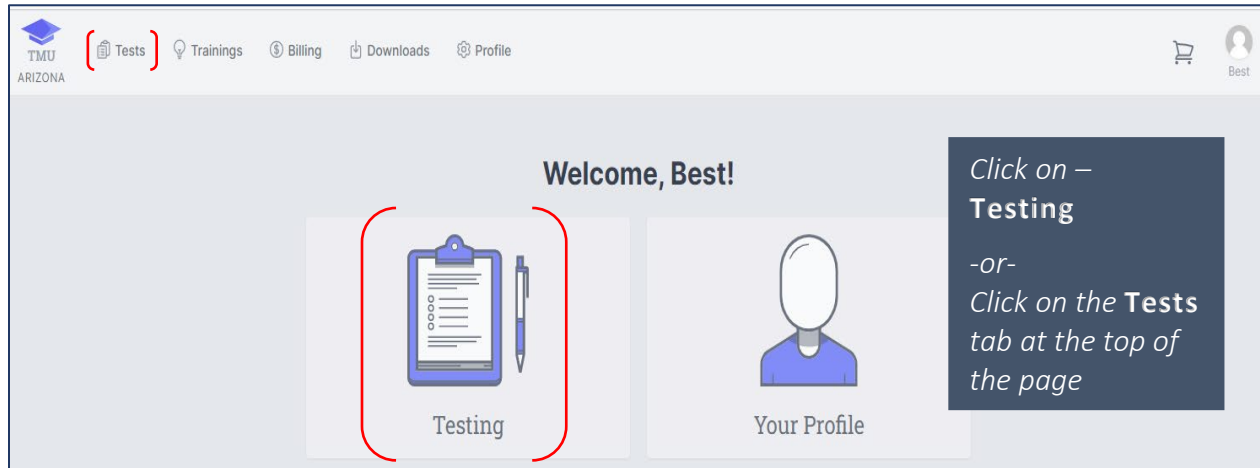
Testing fees will need to be paid *before* you can schedule a test date.

Once your training program has completed your training record with completion hours and date, you will receive an email and text message that you are eligible to schedule a test date.

## Arizona Medication Assistant Candidate Handbook

**Note:** Some training programs pre-pay testing fees for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor if the training program has already prepaid for your test.

Securely processed Visa or MasterCard credit/debit card information is required when paying testing fees online.



TMU ARIZONA Tests Trainings Billing Downloads Profile

Home > Prepay

Prepay to Schedule

What You're Paying For

DESCRIPTION	COST
Medication Assistant for Best Student	25.00
Arizona Medication Assistant Skill Test for Best Student	70.00
<b>Total:</b>	<b>\$95.00</b>

Pay with a Card

CARDHOLDER NAME:  CARD NUMBER:

EXP MONTH:  EXP YEAR:  SECURITY CODE:

CARDHOLDER ADDRESS:

CITY:  STATE:  ZIP CODE:

[Submit Payment](#)

Enter the Credit Card information and then click on-Submit Payment  
You will receive a receipt of the transaction.

### Schedule/Reschedule a Test Event

Once your testing fees are paid, you can choose a test site and date. Follow the instructions in the next section to schedule/reschedule a test event.

TMU ARIZONA Tests Trainings Billing Downloads Profile

Home > Tests

Your Tests

Scheduling

EXAM	REASON
Medication Assistant Knowledge <b>Eligible</b>	
Arizona Medication Assistant Skill Test Skill <b>Eligible</b>	

Testing History

No test history on record.

Pretests

PRETEST	ELIGIBILITY
Medication Aide Training Pretest Skill <b>Eligible</b>	<a href="#">Begin Test</a>

All eligible test components (knowledge and skills) will appear in this format.  
To select a component (you would be scheduled for both K and S on your first attempt), click on - Schedule to the right of the test component you want to schedule.

## Arizona Medication Assistant Candidate Handbook

TMU ARIZONA

Home > Tests > Find Event

Find Event ARIZONA MEDICATION ASSISTANT

TEST DATE	TEST SITE	SCHEDULING FOR
01/12/2023 8:00 AM MST	PRACTICE TEST SITE (TS) PHOENIX, AZ	K Medication Assistant S Arizona Medication Assistant Skill Test
01/12/2023 12:00 PM MST	PRACTICE TEST SITE (TS) PHOENIX, AZ	K Medication Assistant S Arizona Medication Assistant Skill Test

To select a test site and test date click on - Schedule

az.tmutest.com says

Schedule into this Event on 01/12/2023 for Medication Assistant Knowledge, Arizona Medication Assistant Skill Test Skill . Are you sure?

OK Cancel

To confirm this is the site and date you want to schedule into, click on - OK

TMU ARIZONA

Home > Tests

Your Tests

Student Student, Best scheduled into Skill for Arizona Medication Assistant Skill Test. Student Student, Best scheduled into Knowledge for Medication Assistant.

Scheduling

EXAM	REASON
Medication Assistant Knowledge <span>Not Eligible</span>	Already Scheduled
Arizona Medication Assistant Skill Test Skill <span>Not Eligible</span>	Already Scheduled

Testing History

TEST DATE	EXAM	TEST SITE	STATUS
01/12/2023 8:00 AM MST	Medication Assistant Knowledge	PRACTICE TEST SITE (TS) PHOENIX, AZ	Scheduled
01/12/2023 8:00 AM MST	Arizona Medication Assistant Skill Test Skill	PRACTICE TEST SITE (TS) PHOENIX, AZ	Scheduled

This screen confirms you are scheduled for a test date to take your knowledge and skills exam. Your status shows Scheduled, and a note at the top of your screen also shows you are scheduled. Click on- Test Confirmation Page to see your test confirmation with important reminders for testing.

### Test Confirmation Letter

Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time and address). It can be accessed at any time. (See example on the next page.)

## Arizona Medication Assistant Candidate Handbook

The body of the test confirmation letter will refer you to the candidate handbook that will give you state-specific instructions on what time to arrive, ID requirements, dress code, etc.

**Note:** Failure to read the candidate handbook could result in a no-show status for your test event for not adhering to the testing policies, etc.

***It is important you read this letter!***

TMU ARIZONA Tests Trainings Billing Downloads Profile

Scheduled Test Confirmation - Arizona Medication Assistant

Get Map Print Page

Test Date: 01/12/2023  
 Test Time: 8:00 AM MST  
 Test Exam: Knowledge - Mr Skill - Arizona Medication Assistant Skill Test  
 Test Site: PRACTICE TEST SITE (TS)  
 625 BARNEY STREET  
 PHOENIX, AZ 59602

Best Student  
 1000 Arizona Drive  
 Phoenix, AZ 85007

Start Time for this Test Site is in the Arizona (Mountain no DST) timezone.

- TESTING BEGINS AT 8:00 AM MST ON 01/24/2024: ARRIVE AT LEAST 20 MINUTES EARLY TO CHECK-IN
- If you are unable to access your account, go to <https://az.tmutest.com>, click on 'Forgot Password', enter your Email, then click on 'Send Reset Password Link' and follow the directions. If you need further assistance, please call D&SDT-Headmaster at 1.800.393.8664.

**MEDICATION ASSISTANT CANDIDATES:** Refer to the Medication Assistant Competency Exam section of the Arizona Medication Assistant Candidate Handbook regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information before your testing date.

[Click to open the Medication Assistant Candidate Handbook](#)

**NURSE AIDE CANDIDATES:** Refer to the Nurse Aide Competency Exam section of the Arizona Nurse Aide Candidate Handbook regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information prior to your testing date.

- [Click to open the Nurse Aide Candidate Handbook](#)

Click on- Print Page to print your confirmation letter.  
 Click on- Get Map to get Google Maps directions to the test site.

**Note:** Candidates who self-schedule online, or those scheduled by their training programs, will receive their test confirmation at the time they are scheduled.

D&SDT-Headmaster **does not send** postal mail test confirmation letters to candidates.

### Check/View your TMU® Notifications

Remember to check your 'notifications' in your TMU® account for important notices regarding your selected test events and other information. See the screenshots that follow:



# Arizona Medication Assistant Candidate Handbook

TMU ARIZONA Tests Trainings Billing Downloads Profile

When you have 'notifications' they will show up when you click on your profile pic. The number represents the number of notifications you have to view.

Click on- **Your Profile Pic** to open your profile and notifications.

Click on- **Notifications** to view all of your notifications.

Welcome, SAMPLE!

Testing Your Profile

Your Profile Notifications 2 Log Out

Home > Inbox

Your Notifications

WITH SELECTED: Mark Unread Mark as Read Send to Trash Clear All Notifications

<input type="checkbox"/>	TITLE	SENT	MESSAGE	<a href="#">VIEW</a>
<input type="checkbox"/>	Scheduled Into Event	20 minutes ago	You were scheduled into a Test Event	<a href="#">VIEW</a>
<input type="checkbox"/>	Scheduled Into Event	20 minutes ago	You were scheduled into a Test Event	<a href="#">VIEW</a>

Click on- **VIEW** to open each of your notifications.

Notification example:

Home > Inbox > View Notification

Scheduled Into Event 3 days ago

Scheduled Into Event

You have been scheduled for Knowledge Exam **Medication Assistant** beginning **12/22/2024 9:00 AM MST** at Test Site **VILLA MARIA HEALTH AND RECOVERY (TS)**

← Back to All Messages Send to Trash Mark as Unread

## Time Frame for Testing from Training Program Completion

You will be scheduled to take your knowledge and skill tests on the same day. You must schedule a test **within one year of the completion date of your training program**. After one year, if you have not tested and passed, you must complete another AZBN-approved Medication Assistant training program to be eligible to schedule testing.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor if the training program has already scheduled and/or prepaid for your test. Regional test seats are open to all candidates. Regional test dates are posted on the Arizona TMU© site.

If you have any questions regarding your test scheduling, call D&SDT-Headmaster at (800)393-8664 during regular business hours, 6:00AM to 6:00PM, MT, Monday through Friday, excluding Holidays.

## Exam Check-In

You must arrive at your confirmed test site **at least 20 to 30 minutes** before your exam starts.

- Testing **begins** promptly at the start time noted.
- You need to ensure you are at the event at least 20 minutes before the start time to allow time to get signed in with the RN Test Observer.
  - *For example:* if your test start time is 8:00AM, you must be at the test site for check-in **no later than 7:40AM**.

**Note:** If you arrive late, you will not be allowed to test.

## Testing Attire

The required testing attire applies to both the knowledge and skills exams.

- You must be in full clinical attire:
  - This consists of a scrub top and scrub bottoms.
  - Closed-toed shoes.
  - Scrubs and shoes can be any color/design.
- No smartwatches, fitness monitors, or Bluetooth-connected devices are allowed.
- Long hair must be pulled back.

**NOTE: You must be dressed in professional nursing attire, to the discretion of the RN Test Observer.**

- You will not be admitted for testing if you are not wearing professional nursing (scrubs) attire and closed-toed shoes. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

## Identification

You must bring a **US GOVERNMENT-ISSUED, PHOTO-BEARING FORM OF IDENTIFICATION**.

Only original forms of identification are allowed. Photocopies, faxes, emails, screenshots, and electronic or digitally stored forms (for example, Apple or Google Wallet) of identification **will not be accepted**.



Examples of the forms of US government-issued, acceptable photo IDs are:

- Driver's License (*Arizona Driver's License must be issued after January 1, 1997*)
- State-issued Identification Card (*Arizona State ID must be issued after January 1, 1997*)
- US Passport
  - *Exception: A signed foreign passport with a US VISA is acceptable (the VISA does not have a signature).*
- US Passport Card
- Permanent Resident Card (Green Card or Alien Registration Card)/Employment-Work Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS) (*the new redesigned permanent resident card ISSUED from January 30, 2023, to the present day is acceptable. The old card, issued before January 1, 2023, is acceptable as long as it is not expired.*)
- Tribal Identification Card (*must contain a photo issued by a federally recognized Tribal Nation/Indian Tribe*)

The **FIRST** and **LAST** names listed on the ID presented to the RN Test Observer during sign-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names entered in the Arizona medication assistant TMU© database by your training program. You may call D&SDT-Headmaster at (800)393-8664 during regular business hours, Monday through Friday, 6:00AM to 6:00PM MT, excluding Holidays, to confirm that your name of record matches your US government-issued ID, or sign in to your TMU© account ([az.tmutest.com](https://az.tmutest.com)), using your Email or Username and Password, to check or change your demographic information.

### Note:

- **You will not be admitted for testing if you do not bring proper/valid identification.**
  - Check to be positive that both your FIRST and LAST printed names on your ID match your current name of record in TMU©.
  - A driver's license or state-issued ID card with a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID.
- In cases where names do not match or your ID is not proper/valid, you will be considered a no-show status, forfeit your testing fees and have to pay for another exam date.

You will be required to present your ID again when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam day.

### Demographic Updates / Changes / Corrections

Name changes (marriage/divorce, etc.), date of birth changes, social security number corrections, etc., must be verified with appropriate documentation. Please complete the **DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM** and upload your demographic change/correction documentation. The form is under 'Applications' on the Arizona TMU© main web page (before you log in to your account), or click on this link: <https://az.tmutest.com/apply/7>.

You will be required to present your ID again when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam day.

### Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill exams will be provided in written format in the waiting area when you check in for your test.

These instructions detail the process and what you can expect during your exams. Please read the instructions **before** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Observer or Knowledge Test Proctor will ask questions about the instructions you read when entering the knowledge test room and skill test lab.

The **Knowledge and Skill Exam Instructions** are available under the **'DOWNLOADS'** tab in your TMU© account. For instructions, refer to the **'Access the Candidate Handbook and Testing Instructions'** section of this handbook.

## Testing Policies

The following policies are observed at each test site:

- Communication between the candidate and the testing team must be in English.
- Make sure you have signed in to your TMU© account at [az.tmutest.com](http://az.tmutest.com) before your test date to update your password and complete your demographic information. Refer to this handbook's **'Complete Your TMU© Account'** section for instructions and information.
  - **If you have not signed in and completed/updated your TMU© record when you arrive for your test, you may not be admitted to the exam, and any exam fees paid will NOT be refunded.**
- If you arrive late for your confirmed exam (you need to be at the test site to **check in at least 20 to 30 minutes before your scheduled start time** – if your test start time is 8:00AM, you need to be at the test site **by 7:40AM at the latest**), you will not be admitted to the exam. Any exam fees paid *will NOT be refunded*.
- If you do not bring a valid and appropriate US government-issued photo ID, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
  - If the FIRST and LAST printed names on your ID do not match your current name of record in TMU©, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not wear professional nursing clinical attire and closed-toed shoes and conform to all testing policies for both the knowledge (including retakes) and skills portion of the exam, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you are a NO-SHOW STATUS for your exam day, any test fees paid *will NOT be refunded*.
  - **If your exam is paid for by a US government-funded facility, you (the candidate) will be charged a NO SHOW fee that will need to be paid before you can schedule a new test date.**
- **PERSONAL ITEMS:** Such as water bottles, briefcases, large bags, study materials, extra books, or papers are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area to place your personal items, and you will collect these items when you complete your test(s).
- **ELECTRONIC DEVICES:** Cell phones, smart watches, fitness monitors, electronic recording devices, and Bluetooth-connected devices are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area to place your electronic devices, and you will collect these items when you complete your test(s).
  - All electronic devices must be **turned off**. Smartwatches, fitness monitors, and Bluetooth-connected devices must be removed from your wrist/body.
- Anyone caught using any electronic recording device during testing will be dismissed from the exam, your exam will be scored as a failed attempt, you will forfeit all testing fees, be reported to your training program and the Arizona State Board of Nursing, and will not be permitted to test for 6 months. You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink, or study material while waiting to test.

## Arizona Medication Assistant Candidate Handbook

- Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators **are not allowed**.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke, use e-cigarettes, or vape during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any misconduct, are visibly impaired, or trying to take any notes or testing materials from the testing room, you will be dismissed from the exam, your exam will be scored as a failed attempt, and you will be reported to your training program and the Arizona State Board of Nursing.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- No visitors, guests, pets (including companion animals), or children are allowed.
  - Service animals with an approved ADA accommodation in place are allowed.
- **You may not test if you are ill (sick)**. Call D&SDT-Headmaster at (800)393-8664 immediately to reschedule (see the **note** below).
  - **You may not test** if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a medication assistant. (Examples: cast, arm/leg braces, crutches, etc.). Call D&SDT-Headmaster at (800)393-8664 immediately to reschedule if you are on doctor's orders (see the **note** below).

**NOTE:** Please see this handbook's '**Reschedule a Test Event**' and '**No-Show Exceptions**' sections.

→ Reschedules will not be granted less than one (1) full business day before a scheduled test date.

- **Please review this Arizona Medication Assistant Candidate Handbook before your test day for any testing and/or policy updates.**
- The Candidate Handbook can also be accessed within your TMU© record under your 'Downloads' tab.

### Access the Candidate Handbook and Testing Instructions

Click on- Downloads

Welcome, SAMPLE!

Testing Your Profile

Click on- Download to open the Arizona Medication Assistant Candidate Handbook. The Knowledge and Skill Exams Instructions are also available here.

Download Item	Action
MEDICATION ASSISTANT: Arizona Medication Assistant Candidate Handbook EFFECTIVE 1-1-2024	DOWNLOAD
NURSE AIDE: Arizona Nurse Aide Candidate Handbook EFFECTIVE 1-22-2024	DOWNLOAD
NURSE AIDE: Knowledge Exam Instructions Please read these instructions before taking your nurse aide knowledge exam.	DOWNLOAD
NURSE AIDE: Skill Test Instructions Please read these instructions before taking your nurse aide skills exam.	DOWNLOAD
MEDICATION ASSISTANT: Knowledge Exam Instructions Please read these instructions before taking your medication assistant knowledge exam.	DOWNLOAD
MEDICATION ASSISTANT: Skills Test Instructions Please read these instructions before taking your medication assistant skills test.	DOWNLOAD

## Security

If you refuse to follow directions, use abusive language, disrupt the examination environment, or are visibly impaired, your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and forfeit any testing fees paid. A report of your behavior will be given to your training program and AZBN. You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to their training program and AZBN and is subject to prosecution to the full extent of the law. Your test will be scored as a failed attempt, and you will forfeit any testing fees that have been paid. You will not be allowed to retest for a minimum period of six (6) months. You will need to obtain permission from AZBN to be eligible to test again.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, Blue-tooth connected devices, or navigating to other browsers/sites during an exam, etc.), your test will be stopped, you will be dismissed from the testing room, and your test will be scored as a failed attempt. You will forfeit any testing fees paid. You will be reported to your training program and AZBN, and you may need AZBN's permission to test again.

## Reschedules

All candidates can reschedule online in their TMU© account using their Email or Username and Password any time up until **one (1) full business day** preceding a scheduled test day, **excluding** Saturdays, Sundays, and Holidays.

You may reschedule an exam date by signing in to your TMU© account at [az.tmutest.com](http://az.tmutest.com) using your Email or Username and Password. (See instructions under '**Schedule/Reschedule a Test Event**'.)

- **Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to reschedule online by the Thursday before your scheduled exam.

The scheduled test date is on a:	Reschedule online by the previous:
Monday	The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

**Note:** Reschedules will not be granted less than one (1) full business day before a scheduled test date.

## Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Arizona Medication Assistant certification test at all.

## Scheduled in a Test Event

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at [www.hdmaster.com](http://www.hdmaster.com) at least **one (1) full business day** before your scheduled test event (excluding Saturdays, Sundays and Holidays). No phone calls will be accepted.

**Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to request a refund by the close of business on the Thursday before your scheduled exam. D&SDT-Headmaster's regular business hours are Monday through Friday, 6:00AM to 6:00PM, MT, excluding Saturdays, Sundays, and Holidays.

- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of payment of original testing fees with HEADMASTER. Any requests for refunds made beyond 30 days of the original payment of testing fees with HEADMASTER will not be issued.

## Not Scheduled in a Test Event

- 1) Refund requests must be made within thirty (30) days of original payment of testing fees with HEADMASTER. Any requests for refunds made beyond 30 days of the original payment of testing fees with HEADMASTER will not be issued.
- 2) A refund request for testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at [www.hdmaster.com](http://www.hdmaster.com). No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

## Unforeseen Circumstances Policy

If an exam date is canceled due to an unforeseen circumstance, D&SDT-Headmaster staff will make every effort to contact you using the contact information (phone number/email) we have on file to reschedule you for no charge to a mutually agreed upon new test date.

Therefore, you must keep your contact information up to date in case we need to contact you (*\*see examples below for reasons we may not be able to contact you that you are responsible for*).

If D&SDT-Headmaster is unable to reach you via phone call or email with the information in your TMU© account (*\*see examples below*) in the event of an unforeseen circumstance for a test event you are scheduled in to, you will be taken out of the test event, and D&SDT-Headmaster will not reschedule you until we hear back from you.

**NOTE:** The *\*examples* listed below are your responsibility to check and/or keep updated.

- If D&SDT-Headmaster leaves you a message or emails you at the phone number or email in your record and:
  - you do not call us back in a timely manner
  - your phone number is disconnected/mailbox is full
  - you do not check your messages in a timely manner
  - you do not check your email or reply to our email in a timely manner
  - your email is invalid, or you are unable to access your email for any reason

## No-Show Status

If you are scheduled for your exam and do not show up without notifying D&SDT-Headmaster at least one (1) full business day before your scheduled testing event, *excluding* Saturdays, Sundays, and Holidays, or if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO-SHOW STATUS**. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset D&SDT-Headmaster cost incurred for services requested and resulting work performed. If a reschedule or cancellation request is not received before the one (1) full business day preceding a scheduled test event, *excluding* Saturdays, Sundays, and Holidays (see examples under Reschedule a Test Event and Refunds of Testing Fees Paid), a NO-SHOW status will exist, and you will forfeit your testing fees. You must repay the full testing fee to secure a new test event.

## No-Show Status Exceptions

Exceptions to the No Show status exist. If you are a No-Show Status for any test component for any of the following reasons, test fees will be refunded, or a free reschedule will be authorized to the remitter of record **with appropriate documentation provided within the required time frame**.

- **Car breakdown or accident**: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and a tow bill, police report, or other appropriate documentation showing your name and the provider of service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within three business days of your exam date, you will have to pay as though you were a no-show.
- **Weather or road condition-related issue**: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email, and a road report, weather report, or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within three business days of your exam date, you will have to pay as though you were a no-show.
- **Medical emergency or illness**: D&SDT-Headmaster must be contacted within one business day via phone, fax, or email, and a doctor's note showing your name and the provider of service name (or be on the provider's letterhead) must be submitted **within three (3) business days** of the missed exam date. If we do not receive proof within three business days of your exam date, you will have to pay as though you were a no-show.
- **Death in the family**: D&SDT-Headmaster must be contacted within one business day via phone, fax, or email, and an obituary or letter showing your name and the provider of service name submitted on your behalf from the funeral home for immediate family must be submitted **within seven (7) business days** from a missed exam date. If we do not receive proof within seven business days of your exam date, you will have to pay as though you were a no-show. (The immediate family includes the parent, grand and great-grandparent, sibling, children, spouse, or significant other.)

## Test Results

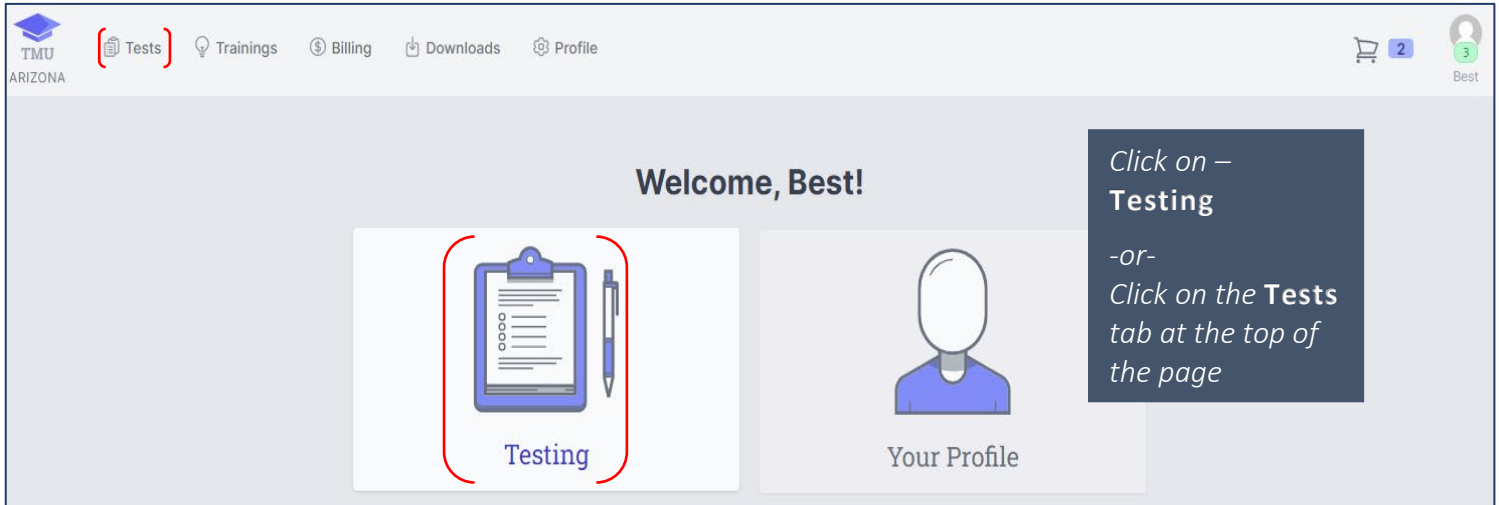
After completing the competency exam's knowledge and skill test components, your test results will be officially scored and double-checked. Official test results will be available by signing in to your TMU© account after 6:00PM (MT) the business day after your test event.



## Arizona Medication Assistant Candidate Handbook

**Note:** D&SDT-Headmaster does not send postal mail test result letters to candidates.

Sign in to your TMU© account at [az.tmutest.com](https://az.tmutest.com) to view your test results. (Refer to the screenshots below.)



TEST DATE	EXAM	TEST SITE	STATUS	
10/08/2022 2:00 PM MST	Arizona Medication Assistant Skill Test Skill	ARIZONA MEDICAL TRAINING INSTITUTE (AMTI) - (TS) MESA, AZ	Passed	Details Print Test Results
09/04/2022 8:00 AM MST	Medication Assistant Knowledge	ARIZONA MEDICAL TRAINING INSTITUTE (AMTI) - (TS) MESA, AZ	Passed	Details Print Test Results
09/04/2022 8:00 AM MST	Arizona Medication Assistant Skill Test Skill	ARIZONA MEDICAL TRAINING INSTITUTE (AMTI) - (TS) MESA, AZ	Failed	Details Print Test Results

Click on – Details  
to view your results.  
Click on Print Test Results to  
print your results.

## Arizona Medication Assistant Candidate Handbook

Test Results Example:

← Back
Print

**HEADMASTER, LLP**  
 P.O. BOX 6609, HELENA, MT 59604-6609  
 800-393-8664 — FAX: 406-442-3357 WWW.HDMASTER.COM

**ARIZONA MEDICATION ASSISTANT EXAM RESULTS REPORT**

**Best Student**  
 1000 Arizona Drive  
 Phoenix, AZ 85007

**IMPORTANT TEST RESULTS**  
 TEST DATE: Sunday, September 4, 2022

Dear **Best**

You have **passed** the knowledge portion of the Medication Assistant exam.  
 Your overall knowledge test score is 90.91%.  
 You have **failed** the skill portion of the Medication Assistant exam.  
**80%** or better on each skill task without missing any **Key Steps** to pass the skills test.

Any weaknesses indicated in your test results are listed below:

**Knowledge Exam Results By Subject Area**

Rights of Medication Administration	67%
Effects of Medication on Body Systems	90%
Allowable Routes	100%
Controlled Substances	100%
Medication Administration	100%
Documentation	100%
Error Reporting	67%
Role/Responsibilities	86%
Terminology	83%
Body Systems - A&P	100%
Regulations	100%
Resident Safety - Infection Control	100%

**Skill Exam Incomplete Steps**

**Eye Drops / Tablet Medication Administration 2.2022**  
 Asks resident, "Please tell me your name...  
 Asks resident, "Please tell me your date...  
 Identifies right resident using an appro...  
 Performs hand hygiene with hand sanitize...  
**Nasal Spray / Tablet Medication Administration 2.2022**  
 Instructs resident to breath in with mou...

**Manual Skill Task(s) Failed:** Eye Drops / Tablet Medication Administration 2.2022 **vocabulary words to study:** legal restriction, six rights, error reporting, continuing education, medication affect

### Test Attempts

You have **unlimited attempts** to pass the exam's knowledge and skill test portions **within one year from your Medication Assistant training program completion date**. If you do not successfully complete testing within one year from completion of training, you must complete a new AZBN-approved training program to become eligible to further attempt Arizona Medication Assistant examinations.

### Retaking the Medication Assistant Exam

If you fail the knowledge and/or skill portion of the examination, when you want to apply for a retest, you will need to repay for the portion you failed before you can schedule a new exam date.

You can schedule a test or re-test online by signing in to your TMU© record at [az.tmutest.com](http://az.tmutest.com). (See information under **'Schedule/Reschedule a Test Event'** for rescheduling instructions.)

You will need to pay with a Visa or Master Card credit/debit card before you can schedule.



If you need assistance scheduling your re-test, please call D&SDT-Headmaster at (800)393-8664 during regular business hours, 6:00AM to 6:00PM, Monday through Friday, MT, excluding Holidays. We can assist you in scheduling a test or re-test date as long as your fees have been paid first.

## Test Review Requests

You may request a review of your test results or dispute any other testing condition.

**PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST:** Please call D&SDT-Headmaster at (800)393-8664 during regular business hours, 6:00AM to 6:00PM MT Monday through Friday, excluding holidays, and discuss the test outcome you are questioning before committing to paying the \$25 non-refundable test review request deposit. Once you have further details about the scoring of your test, you will often understand the scoring process and learn how to better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-Headmaster staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

**There is a \$25 non-refundable test review deposit fee.** [Test Review Request and Payment Form 1403](#), which is available on D&SDT-Headmaster’s main webpage at [www.hdmaster.com](http://www.hdmaster.com) (before you get to the Arizona CMA webpage). Submit the Test Review Fee of \$25 (MasterCard or Visa credit/debit card) and a detailed explanation of why you feel your dispute is valid. Test Review Requests must be received **within three (3) business days** from the official scoring of your test (excluding Saturdays, Sundays, and holidays). Late requests will be denied and will not be considered.

Since one qualification for certification as an Arizona medication assistant is demonstrated by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the review results are in your favor, D&SDT-Headmaster will refund your test review deposit. If the determination of the review is **not in your favor**, the \$25 test review fee ***is not refundable***.

D&SDT-Headmaster will review your detailed recollection, your knowledge test markings, and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations, and measurements recorded by the RN Test Observer at the time of your test. D&SDT-Headmaster will re-check the scoring of your test and may contact you and/or the RN Test Observer and professional Actor for any additional recollection of your test(s).

D&SDT-HEADMASTER will not review test results or disputes with instructors/training programs, family members, or anyone else on behalf of the candidate.

D&SDT-Headmaster will complete your review request within ten business days of receiving it in the required timeframe. The final determination of the review results will be sent to the email address listed in your TMU@ account, as well as a notification to the Arizona State Board of Nursing.

## Applying for an Arizona License

To apply for certification as a Certified Medication Assistant with AZBN, you must adhere to the following:

- All CMAs must apply together with the LNA license.
- All CMAs must be 18 years old and older.
- All CMAs must have a high school diploma or GED.
- All CMAs must have a lawful presence and photo IDs.

- Please see Citizenship and Alien Status on the [Arizona Board of Nursing website](#) for more information.
- From the Arizona Board of Nursing webpage under Licenses and Certifications:

### [Arizona Statement of Citizenship & Alien Status](#)

All applicants must answer questions on the application regarding citizenship. A Xeroxed copy of a document that shows evidence of your citizenship or alien status **MUST BE** submitted with your application for licensure or renewal. See [List A](#) or [List B](#).

After successfully passing both the Knowledge and Skill Test components of the medication assistant exam, your test results will be sent electronically to the Arizona Board of Nursing by D&SDT-Headmaster.

From the Arizona State Board of Nursing webpage, [www.azbn.gov](http://www.azbn.gov), select the option to apply for a license or certificate. You will be taken to the Arizona Nurse Portal, where you can apply for certification, check on application status, and update your information with the Board. Once you have created a Nurse Portal account, you will have access to start and submit the Certified Medication Assistant (CMA) application. You will be notified by AZBN when you have met all criteria for being a Certified Medication Assistant in Arizona.

## The Knowledge/Audio Exam

You will be required to re-present your ID when entering the knowledge test room and the skills lab for your skills exam. Please keep your ID with you throughout the exam day.

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Exam. You will have **60 minutes** (one hour) to complete the **55-question** Knowledge Exam. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam (such as “What does this question mean?”)

You must have a score of **80%** or better to pass the knowledge portion of the exam.

Electronic testing using TMU© internet-connected computers is utilized at all sites in Arizona. The knowledge exam portion of your exam will be displayed on a computer screen for you to read and key/tap or click in your answers.

**NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge test.** Please see the information under **‘Complete Your TMU© Account’** to sign in to your TMU© account.

**NOTE:** *The Knowledge Test Proctor will provide you with a code at the test event to start your test.*

Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators **are not allowed**.

All test materials must be left in the testing room. Anyone who takes or tries to take materials, notes, or information from the testing room is subject to prosecution and will be reported to the Arizona Board of Nursing.

## Audio Version of the Knowledge Exam

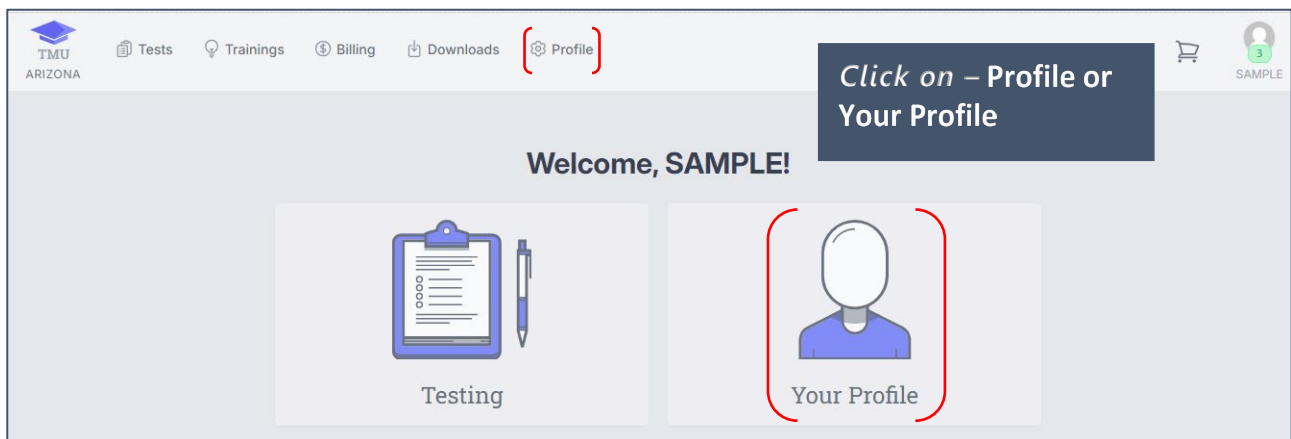
An audio (oral) version of the knowledge exam is available. However, you must request an Audio exam before you submit your testing fee payment. There is an additional \$10 charge for an audio exam (the total cost of a Knowledge AUDIO version is \$35). The questions are neutrally read to you and can be heard through wired headphones/earbuds (Bluetooth-connected devices are not allowed) plugged into the computer. When taking an electronic Audio version of the knowledge exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed. To select the Audio version of the knowledge exam, follow the instructions with screenshots that follow.

**NOTE:** Only the first 45 questions will be read orally on the Audio Knowledge Exam. The remaining 10 questions must be answered without oral assistance to assess English reading comprehension.

→ EXCEPTION: All questions will be read orally if the candidate has an approved ADA.

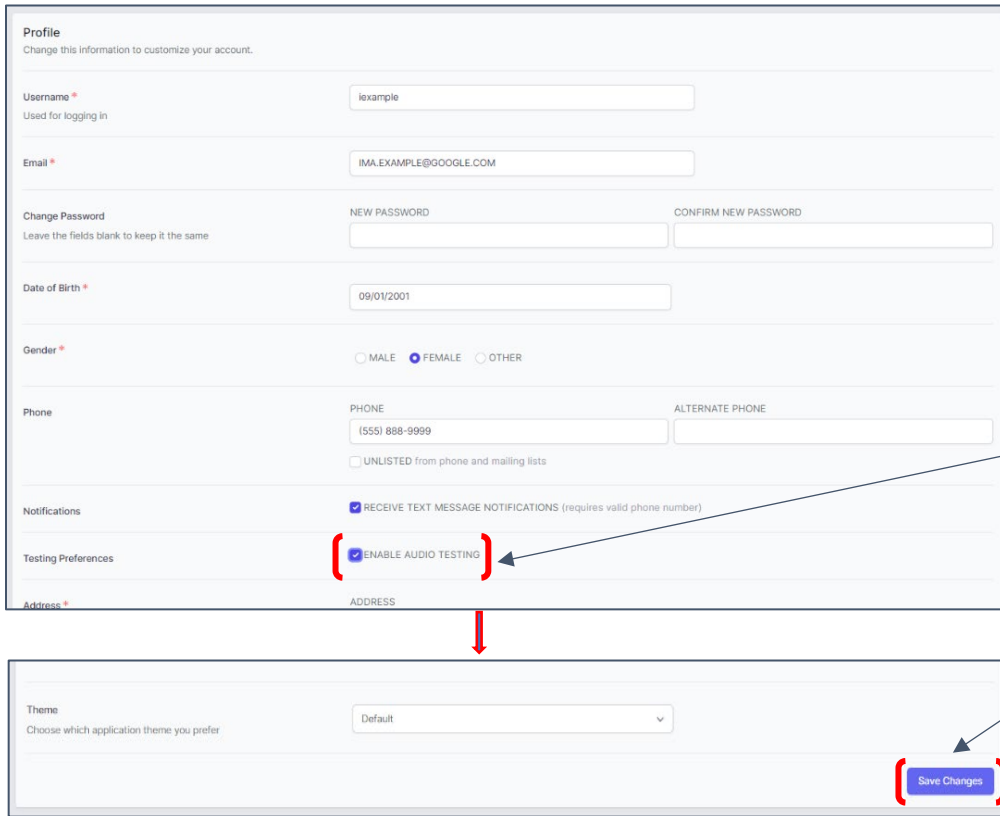
## Enable an Audio Version

Checking the 'Enable Audio Testing' to receive an Audio version of the Knowledge Exam:



-continued on the next page-

## Arizona Medication Assistant Candidate Handbook



**Profile**  
Change this information to customize your account.

**Username \***  
Used for logging in  
example

**Email \***  
IMA.EXAMPLE@GOOGLE.COM

**Change Password**  
Leave the fields blank to keep it the same  
NEW PASSWORD  
CONFIRM NEW PASSWORD

**Date of Birth \***  
09/01/2001

**Gender \***  
 MALE  FEMALE  OTHER

**Phone**  
PHONE  
(555) 888-9999  
ALTERNATE PHONE  
 UNLISTED from phone and mailing lists

**Notifications**  
 RECEIVE TEXT MESSAGE NOTIFICATIONS (requires valid phone number)

**Testing Preferences**  
 **ENABLE AUDIO TESTING**

**Address \***  
ADDRESS

**Theme**  
Choose which application theme you prefer  
Default

**Save Changes**

Remember to check the 'Enable Audio Testing' **BEFORE YOU SCHEDULE** your knowledge exam.

Click on the box to the left of Enable Audio Testing to choose the Audio option of the knowledge exam.

Then click Save Changes at the bottom of the screen to save.

### Knowledge Exam Content

The Knowledge Exam consists of 55 multiple-choice questions. Questions are selected from subject areas based on the AZBN-approved Arizona Medication Assistant test plan and all the required categories defined in federal regulations. The subject areas are as follows:

SUBJECT AREA	NUMBER OF QUESTIONS	SUBJECT AREA	NUMBER OF QUESTIONS
Allowable Route	3	Medication Administration	10
Body Systems – A&P	3	Regulations	3
Controlled Substances	2	Resident Safety – Infection Control	2
Documentation	3	Role and Responsibility	7
Effects of Medication	10	Six Rights	3
Error Reporting	3	Terminology	6

The following is a sample of the questions that you will find on the Knowledge/Audio exam.

**1. An order for Colace qd would require that you administer this medication to a resident:**

- (A) Once a week
- (B) Every day
- (C) On an empty stomach
- (D) When the resident complains of constipation

**2. If a resident refuses to take the medication you bring to him, you should:**

- (A) Make a mental note and plan to come back and try again later
- (B) Try to get the resident to take his medication anyway
- (C) Leave the medication on the resident's bedside stand and instruct him to take it later
- (D) Document the refusal and report it to the nurse

**3. The following medication is not allowed to be administered by a medication assistant:**

- (A) A regularly scheduled oral hypertensive agent
- (B) An antibiotic cream applied to an open wound
- (C) A laxative to be administered by rectal suppository
- (D) A schedule III controlled substance timed for every night

ANSWERS: 1-B | 2-D | 3-B

## The Manual Skill Test

- The Skill Test evaluates your performance when demonstrating Arizona-approved medication assistant skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to re-present your ID that you showed the RN Test Observer at check-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Two (2) medication administration tasks will be randomly selected from the list of skill tasks for you to perform as your skill test. Each of your randomly selected tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- After hearing a scenario, you will use the MAR to determine what medications to obtain from the locked medication cart. You will administer the medications obtained to a live resident actor.
- You will be allowed **25 minutes** to complete your medication administrations. After 10 minutes have elapsed, you will be alerted that 15 minutes remain.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.

- You must correctly perform all **key** steps (in bold font) and 80% of all non-key steps on all medication administrations assigned to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly to receive credit for the correction.
- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted 25 minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are not order dependent unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated “relaxation area.” When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- **All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.**

### Skill Tasks Listing

To receive credit, you must actually perform and demonstrate every step during your skill test demonstration.

The steps listed for each task are required for a medication assistant candidate to successfully demonstrate minimum proficiency in the skill task for the RN Test Observer. You will be scored only on the steps listed. If you fail a single task, you will have to take another skill test with two tasks on it. The skill tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your medication administration tasks and record what they see you do. D&SDT-Headmaster scoring teams will officially score and double-check your test.

**Note:** The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arizona Medication Assistant skill test, and the steps included herein are not intended to be used to provide complete care that would be all-inclusive of best care practiced in an actual work setting.

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### Ear Drops / Tablet Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident’s MAR.
- 4) Identify medications to be given to the resident.
- 5) **For each medication, identify the correct drug label for the correct resident’s MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
- 7) **For each medication, identify the right dose and compare the labels to the right resident’s MAR.**
- 8) **Medications selected are for the correct time.**
- 9) **Medications selected are for the correct routes.**

- 10) Open container.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
- 13) Lock the medication cart.
- 14) Close or cover MAR.
- 15) Greet the resident.
- 16) Introduce yourself by name as a medication assistant.
- 17) Explain the procedure to the resident.
- 18) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 19) Ask the resident to state their name.
- 20) Ask the resident to state their date of birth.
- 21) Give the resident a glass of water.
- 22) Provide medications to the resident.
- 23) Assist the resident in taking medication.
- 24) Lower the head of the bed.
- 25) Remove container lid.
- 26) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 27) Turn the resident's head toward the correct side with the correct ear upward.
- 28) Hold the resident's external ear flap (pinna) and pull up and back.
- 29) Instill the correct number of prescribed drops of medication into the correct ear.**
- 30) Do not touch the inside of the resident's ear canal with the container tip.
- 31) Tell resident to not move their head for a few minutes.
- 32) Return medication to the medication cart.
- 33) Lock the medication cart.
- 34) Document administration on the medication administration record (MAR) on the correct day.**
- 35) Initial and sign MAR.
- 36) Close or cover MAR.
- 37) Maintain respectful, courteous interpersonal communications during administrations.
- 38) Place the call light within easy reach of the resident.
- 39) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

### Eye Drops / Tablet Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)



- 7) For each medication, identify the right dose and compare the labels to the right resident's MAR.
- 8) Medications selected are for the correct time.
- 9) Medications selected are for the correct routes.
- 10) Open container.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
- 13) Lock the medication cart.
- 14) Close or cover MAR.
- 15) Greet the resident.
- 16) Introduce yourself by name as a medication assistant.
- 17) Explain the procedure to the resident.
- 18) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 19) Ask the resident to state their name.
- 20) Ask the resident to state their date of birth.
- 21) Give the resident a glass of water.
- 22) Provide medications to the resident.
- 23) Assist the resident in taking medication.
- 24) Put on gloves.
- 25) Remove container lid.
- 26) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 27) Gently tilt the resident's head back with chin up.
- 28) Pull down on the resident's lower eyelid of the correct eye, making a pocket.
- 29) Ask the resident to look up toward the forehead.
- 30) **Drop the correct number of prescribed drops of medication into the correct pocket.**
- 31) The container tip does not touch the resident's eye.
- 32) Apply gentle pressure to the inner corner of the resident's eye.
- 33) Use a tissue to remove any excess fluid from around the resident's eye.
- 34) Remove and discard gloves.
- 35) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 36) Return medication to the medication cart.
- 37) Lock the medication cart.
- 38) **Document administration on the medication administration record (MAR) on the correct day.**
- 39) Initial and sign MAR.
- 40) Close or cover MAR.
- 41) Maintain respectful, courteous interpersonal communications during administrations.
- 42) Place the call light within easy reach of the resident.
- 43) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.



## Nasal Spray / Tablet Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
- 7) For each medication, identify the right dose and compare the labels to the right resident's MAR.**
- 8) Medications selected are for the correct time.**
- 9) Medications selected are for the correct routes.**
- 10) Open containers.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
- 13) Lock the medication cart.
- 14) Close or cover MAR.
- 15) Greet the resident.
- 16) Introduce yourself by name as a medication assistant.
- 17) Explain the procedure to the resident.
- 18) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 19) Ask the resident to state their name.
- 20) Ask the resident to state their date of birth.
- 21) Give the resident a glass of water.
- 22) Provide medications to the resident.
- 23) Assist the resident in taking the medication one tablet at a time.
- 24) Remove container lid.
- 25) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 26) Have resident blow their nose.
- 27) Instruct resident to breathe in with mouth closed.
- 28) Time administration of spray with resident's inhalation.
- 29) Press the resident's correct nostril closed while administering nasal spray.
- 30) Administer the correct number of prescribed spray(s) in the resident's correct nostril.**
- 31) Return medication to the medication cart.
- 32) Lock the medication cart.
- 33) Document administration on the medication administration record (MAR) on the correct day.**
- 34) Initial and sign MAR.
- 35) Close or cover MAR.

- 36) Maintain respectful, courteous interpersonal communications during administrations.
- 37) Place the call light within easy reach of the resident.
- 38) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

### Oral Capsule Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
- 7) For each medication, identify the right dose and compare the labels to the right resident's MAR.**
- 8) Medications selected are for the correct time.**
- 9) Medications selected are for the correct routes.**
- 10) Open the first container or pop medication from the blister pack.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Pour the correct number of prescribed capsules into the medication cup without touching the medication.
- 13) Open the second container or pop medication from the blister pack.
- 14) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 15) Pour the prescribed number of capsules into the medication cup without touching the medication.
- 16) Return medication to the medication cart.
- 17) Lock the medication cart.
- 18) Close or cover MAR.
- 19) Greet the resident.
- 20) Introduce yourself by name as a medication assistant.
- 21) Explain the procedure to the resident.
- 22) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 23) Ask the resident to state their name.
- 24) Ask the resident to state their date of birth.
- 25) Give the resident a glass of water.
- 26) Provide medications to the resident.
- 27) Assist the resident in taking the medication one capsule at a time.
- 28) Document administration on the medication administration record (MAR) on the correct day.**
- 29) Initial and sign MAR.
- 30) Close or cover MAR.

- 31) Maintain respectful, courteous interpersonal communications during administrations.
- 32) Place the call light within easy reach of the resident.
- 33) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

### Oral Liquid Medication / Ear Drops Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
- 7) For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
- 8) Medications selected are for the correct time.**
- 9) Medications selected are for the correct routes.**
- 10) Open container.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Set the medication cup on a level surface.
- 13) Pour the correct amount of prescribed medication into the medication cup.**
- 14) Check for the correct amount of medication at eye level.
- 15) Lock the medication cart.
- 16) Close or cover MAR.
- 17) Greet the resident.
- 18) Introduce yourself by name as a medication assistant.
- 19) Explain the procedure to the resident.
- 20) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 21) Ask the resident to state their name.
- 22) Ask the resident to state their date of birth.
- 23) Provide medication to the resident.
- 24) Assist the resident in taking the oral medication.
- 25) Lower the head of the bed.
- 26) Remove container lid.
- 27) Do not contaminate the lid during the removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 28) Turn the resident's head to the correct side with the correct ear upward.
- 29) Hold the resident's external ear flap (pinna) and pull up and back.
- 30) Instill the correct number of prescribed drops of medication into the correct ear.**
- 31) The container tip does not touch the inside of the resident's ear canal.
- 32) Tell the resident not to move their head for a few minutes.
- 33) Return medication to the medication cart.

- 34) Lock the medication cart.
- 35) Document administration on the medication administration record (MAR) on the correct day.**
- 36) Initial and sign MAR.
- 37) Close or cover MAR.
- 38) Maintain respectful, courteous interpersonal communications during administrations.
- 39) Place the call light within easy reach of the resident.
- 40) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

### Oral Liquid Medication / Topical Ointment Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the right drugs as obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
- 7) For each medication, identify the right dose and compare the labels to the right resident's MAR.**
- 8) Medications selected are for the correct time.**
- 9) Medications selected are for the correct routes.**
- 10) Open the container.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Set the medication cup on a level surface.
- 13) Pour the correct amount of prescribed medication into the medication cup.**
- 14) Check for the correct amount of medication at eye level.
- 15) Lock the medication cart.
- 16) Close or cover MAR.
- 17) Greet the resident.
- 18) Introduce yourself by name as a medication assistant.
- 19) Explain the procedure to the resident.
- 20) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 21) Ask the resident to state their name.
- 22) Ask the resident to state their date of birth.
- 23) Provide medication to the resident.
- 24) Assist the resident in taking oral medication.
- 25) Inspect the resident's correct forearm skin area where medication is to be applied.
- 26) Put on one glove.
- 27) Open container.
- 28) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 29) Squeeze ointment onto the finger of the gloved hand.

**30) Apply ointment on the gloved finger to the resident's correct forearm.**

31) Spread ointment to cover the entire area that is to be treated.

32) Remove and discard glove.

33) Perform hand hygiene with hand sanitizer.

a. Cover all surfaces of hands with hand sanitizer.

b. Rub your hands together until they are completely dry.

34) Return medication to the medication cart.

35) Lock the medication cart.

**36) Document administration on the medication administration record (MAR) on the correct day.**

37) Initial and sign MAR.

38) Close or cover MAR.

39) Maintains respectful, courteous interpersonal communications during administrations.

40) Place the call light within easy reach of the resident.

41) Perform hand hygiene with hand sanitizer.

a. Cover all surfaces of hands with hand sanitizer.

b. Rub your hands together until they are completely dry.

### Oral Tablet Medication / Eye Drop Administration

1) Perform hand hygiene with hand sanitizer.

a. Cover all surfaces of hands with hand sanitizer.

b. Rub your hands together until they are completely dry.

2) Open MAR.

3) Identify the correct resident's MAR.

4) Identify medications to be given to the resident.

5) Close or cover MAR.

6) Greet the resident.

7) Introduce yourself by name as a medication assistant.

8) Explain the procedure to the resident.

**9) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**

10) Ask the resident to state their name.

11) Ask the resident to state their date of birth.

12) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.

13) Record the apical heart rate on the MAR.

**14) The recorded apical heart rate is within five (5) beats of the RN Test Observer's recorded apical heart rate.**

**15) Verbalize whether or not to administer medication based on the apical heart rate obtained.**

**16) For each medication, identify the correct drug label for the correct resident's MAR.**

17) Identify the correct drugs as obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)

**18) For each medication, identify the correct dose and compare the labels to the right resident's MAR.**

**19) Medications selected are for the correct time.**

**20) Medications selected are for the correct routes.**

21) If proceeding with tablet administration, open the container.

22) If proceeding with tablet administration, do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)

- 23) If proceeding with tablet administration, pour the correct number of prescribed tablets into the medication cup without touching the medication.
- 24) Lock the medication cart.
- 25) Close or cover MAR.
- 26) If proceeding with tablet administration, give the resident a glass of water.
- 27) If proceeding with tablet administration, provide the medication to the resident.
- 28) If proceeding with tablet administration, assist the resident in taking the medication.
- 29) Put on gloves.
- 30) Remove the container lid.
- 31) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 32) Gently tilt the resident's head back with chin up.
- 33) Pull down on the resident's lower eyelid of the correct eye, making a pocket.
- 34) Ask resident to look up toward forehead.
- 35) Drop the correct number of prescribed drops of medication into the correct pocket.**
- 36) Do not touch the resident's eye with the container tip.
- 37) Apply gentle pressure to the inner corner of the resident's eye.
- 38) Use a tissue to remove any excess fluid from around the resident's eye.
- 39) Remove and discard gloves.
- 40) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 41) Return medication to the medication cart.
- 42) Lock the medication cart.
- 43) Document administration on the medication administration record (MAR) on the correct day.**
- 44) Initial and sign MAR.
- 45) Close or cover MAR.
- 46) Maintain respectful, courteous interpersonal communications during administrations.
- 47) Place the call light within easy reach of the resident.
- 48) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

### Topical Ointment Medication / Oral Capsule Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.
- 5) For each medication, identify the correct drug label for the correct resident's MAR.**
- 6) Identify the correct drugs as obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
- 7) For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
- 8) Medications selected are for the correct time.**
- 9) Medications selected are for the correct routes.**

- 10) Open the container.
- 11) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 12) Pour the capsule into the medication cup without touching the medication.
- 13) Lock the medication cart.
- 14) Close or cover MAR.
- 15) Greet the resident.
- 16) Introduce yourself by name as a medication assistant.
- 17) Explain the procedure to the resident.
- 18) Identify the right resident using an appropriate method of identification (i.e., picture, wristband, or facility-appropriate method of identification).**
- 19) Ask the resident to state their name.
- 20) Ask the resident to state their date of birth.
- 21) Give the resident a glass of water.
- 22) Provide medications to the resident.
- 23) Assist the resident in taking medication.
- 24) Inspect the resident's correct forearm skin area where medication is to be applied.
- 25) Put on one glove.
- 26) Open the container.
- 27) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 28) Squeeze ointment onto the finger of the gloved hand.
- 29) Apply ointment on the gloved finger to the resident's correct forearm.**
- 30) Spread ointment to cover the entire area that is to be treated.
- 31) Remove and discard glove.
- 32) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 33) Return medication to the medication cart.
- 34) Lock the medication cart.
- 35) Document administration on the medication administration record (MAR) on the correct day.**
- 36) Initial and sign MAR.
- 37) Close or cover MAR.
- 38) Maintain respectful, courteous interpersonal communications during administrations.
- 39) Place the call light within easy reach of the resident.
- 40) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.

## Topical Spray Medication / Unit Dose Medication Administration

- 1) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Open MAR.
- 3) Identify the correct resident's MAR.
- 4) Identify medications to be given to the resident.



- 5) Close or cover MAR.
- 6) Greet the resident.
- 7) Introduce yourself by name as a medication assistant.
- 8) Explain the procedure to the resident.
- 9) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
- 10) Ask the resident to state their name.
- 11) Ask the resident to state their date of birth.
- 12) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.
- 13) Record the apical heart rate on the MAR.
- 14) The recorded apical heart rate is within five (5) beats of the RN Test Observer's recorded apical heart rate.**
- 15) Verbalize whether or not to proceed with medication administration based on the apical heart rate obtained.**
- 16) For each medication, identify the correct drug label for the correct resident's MAR.**
- 17) Identify the correct drugs as obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
- 18) For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
- 19) Medications selected are for the correct time.**
- 20) Medications selected are for the correct routes.**
- 21) If proceeding with tablet administration, open the container.
- 22) If proceeding with tablet administration, do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 23) If proceeding with tablet administration, pour the correct number of prescribed tablets into the medication cup without touching the medication.
- 24) Lock the medication cart.
- 25) Close or cover MAR.
- 26) If proceeding with tablet administration, give the resident a glass of water.
- 27) If proceeding with tablet administration, provide the medication to the resident.
- 28) If proceeding with tablet administration, assist the resident in taking medication.
- 29) Inspect the resident's correct forearm skin area where medication is to be applied.
- 30) Open container.
- 31) Do not contaminate the lid during removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.*)
- 32) Instruct resident to turn face away while spraying medication.
- 33) Spray one spray on the area on the resident's correct forearm.**
- 34) Return medication to the medication cart.
- 35) Lock the medication cart.
- 36) Document administration on the medication administration record (MAR) on the correct day.**
- 37) Initial and sign MAR.
- 38) Close or cover MAR.
- 39) Maintain respectful, courteous interpersonal communications during drug administrations.
- 40) Place the call light within easy reach of the resident.
- 41) Perform hand hygiene with hand sanitizer.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.



## Knowledge Test Vocabulary List

abbreviation  
abnormal response to medication  
absorption  
absorption of drugs through the skin  
abuse  
administering medication  
administration  
administration directions  
adverse effects  
adverse reaction  
Advil  
affects of medication  
Albuterol  
alendronate sodium (Fosamax)  
allergic reactions  
allowable routes  
amber-colored containers  
aminoglycoside  
analgesic  
anaphylactic reaction  
anaphylaxis  
anemia  
angina pectoris  
antacids  
antiarrhythmic  
antiarthritics  
antibiotic  
anti-coagulants  
anti-convulsants  
antidepressants  
antidote  
antiemetic  
anti-hypertensive  
anti-infective  
antilipemics  
anti-microbial  
antineoplastics  
anti-Parkinsonian  
antipruritic  
anti-psychotic  
antitussive

anti-viral  
apical  
aspiration  
aspirin  
astringents  
Ativan  
atorvastatin calcium (Lipitor)  
authorized duties  
bacterial infections  
benzodiazepines  
beta blockers  
black box warnings  
Board of Nursing  
bulk-forming laxative  
calcium  
calculations  
carbamazepine (Tegretol)  
carbidopa/levodopa (Sinemet)  
cardiac  
cardiac medication  
cardiovascular drugs  
carisoprodol  
central nervous system  
certification criteria  
certification renewal  
checks  
cholesterol  
cirrhosis  
classification  
clonidine (Catapres)  
CMA eligibility  
Colace  
conduct unbecoming  
confidentiality  
congestive heart failure  
constipation  
continuing education  
contraindicated  
controlled drugs  
controlled medications  
controlled narcotics

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controlled substance

correct administration

corticosteroids

cough medications

cumulative effect

decongestants

delegation

delegation of medications

Depakote

dermatological medication

diabetes

diazepam (Valium)

dietary supplements

digitalis

digoxin (Lanoxin)

digoxin administration

discontinued medication

disposal

diuretic

documentation

docusate sodium (Colace)

dosage

dosage calculation

drug absorption rate

drug actions

drug dependence

Drug Enforcement Agency

drug interactions

drug metabolism

drug reference

drugs

dyspnea

ear drops

edema

electronic documentation

enalapril maleate (Vasotec)

enteric coatings

error reporting

estrogen

excretion

expected adverse affects

extrapyramidal symptoms (EPS)

eye medication

facility policy

fat-soluble

fluoxetine hydrochloride (Prozac)

Food and Drug Administration requirement

fraud

furosemide (Lasix)

glaucoma

glipizide (Glucotrol XL)

gout

habit forming

haloperidol (Haldol)

health care provider order

held medication

herbal medications

histamine

hormones

hyperglycemia

hyperkalemia

hypnotic

hypoglycemia

hypokalemia

ibuprofen

infection control

infections

inflammation

insulin

integumentary system

international time

interpreting administration directions

iron preparations

iron sulfate

itching

kidneys

laxative

laxative affects

legal restriction

lethal dose

levothyroxine sodium (Synthroid)

liquid administration

## Arizona Medication Assistant Candidate Handbook

liquid medication

lisinopril

lithium carbonate (Lithane)

lorazepam (Ativan)

MAR

maximum dose

measurement equivalents

measuring device

medication administration

medication administration documentation

medication administration process

medication administration record

medication affect

medication affect on body

medication assistant's role

medication calculation

medication categories

medication disposal

medication error

medication information

medication interaction

medication inventory

medication knowledge

medication label

medication order

medication refusal

medication route

medication storage

medications

medications affect

mg

mineralocorticoid

missed dose

missed medication

muscle relaxants

naproxen (Naprosyn)

narcotic medication

narcotics

narrow-spectrum antibiotic

nasal medication

nasal spray

needles

negligent

nitrofurantoin (Furadantin)

nitroglycerin

nonsteroidal anti-inflammatory drugs

nothing by mouth

nurse supervision

Nursing Drug Reference manual

ointment administration

ophthalmic

ophthalmic medication

optic

oral antibiotic

oral medications

oral preparations

osteoporosis

OTC

otic

otic medication

over-the-counter

oxygen

Parkinson's disease

paroxetine hydrochloride (Paxil)

pathogens

pediculicide

penicillin

phenazopyridine (Pyridium)

phenytoin (Dilantin)

pituitary

placebo

potassium

potassium sparing diuretic

priorities

privacy

protocol

Proventil

psoriasis

psychotropic drugs

Psyllium hydrophilic muciloid (Metamucil)

radial pulse

rebound effect

## Arizona Medication Assistant Candidate Handbook

rectal suppository  
refusing medication  
regulation  
reporting changes  
reporting errors  
resident rights  
responsibilities  
results of medications  
right drug  
right time  
role  
role and responsibilities  
route administration  
safety  
safety checks  
scheduled medication  
scheduled narcotic  
scope of practice  
scored tablet  
security  
sedatives  
seizures  
sertraline hydrochloride (Zoloft)  
sharps container  
side effects  
six rights  
skin disorder  
skin medication  
skin patches  
special instructions

state regulation  
statin  
stimulants  
subjective information  
sublingual  
sulfonamides  
supplements  
suppository  
suspension of medications  
swallowing medications  
systolic  
tablet disposal  
tachycardia  
terminology  
testing requirements  
Tetracyclines  
therapeutic dose  
thyroid  
tinnitus  
topical medication  
toxic  
transdermal  
types of orders  
urinary system  
valid prescriptions  
vitamins  
vomiting  
warfarin (Coumadin)  
water soluble vitamins

